TO:USPTO

Docket No.;

NO. 3651 P.

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ITRAL FAX CENTER

ZILKA · KOTAB

100 PARK CENTER PLAZA, SUITE 300 SAN JOSE, CA 95113

TELEPHONE (408) 971-2573 FAX (408) 971-4660

App. No: 09/895,498

#### **FAX COVER SHEET**

Date:	July 21, 2006	Phone Number	Fax Number
To:	Examiner Shiferaw		(571) 273-8300
From:	Kevin J. Zilka		

Total Number of Pages Being Transmitted, Including Cover Sheet: 13

NAI1P012/01.132.01

Message:
Please deliver to Examiner Shiferaw.
Thank You,
Kevin J. Zilka

🛘 Original to follow Via Regular Mail X <u>Original will Not be Sent</u> 🚨 Original will follow Via Overnight Courier

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Jids 21 2006

# RECEIVED CENTRAL FAX CENTER

ZILKA-KOTAB, PC JUL. 21. 2006 4:38PM

JUL 2 1 2006

NO. 3651 P. 2

#### **PATENT** IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re ap	oplication of:	)		
J. Mag	dych et al.	) Art Unit: 2136		
Applic	ation No. 09/895,498	) Examiner: Shiferaw, Eleni A.		
Filed: (	06/29/2001	) Date: July 21, 2006		
PROGRAM PI MODIFICATI	, METHOD AND COMPUTER RODUCT FOR DETECTING ONS TO RISK ASSESSMENT AUSED BY AN ATE DEVICE	) ) ) )		
CERTIFICATE OF FACSIMILE  I hereby certify that this correspondence is being facsimile transmitted to the Commissioner for Patents, Alexandria, VA 22313-1450 at facsimile number: (571) 273-8300 on the above date.  Signed:  April Skovmand  Commissioner for Patents P.O. Box 1450				
Alexandria, VA Sir:	22313*1430			
Transmitt	ed herewith is an amendment in the above-i	dentified application.		
	Applicant(s) hereby petition for a extension of time to respond to the outstanding Office Action.  Applicant(s) believe that no Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 50-1351.  If the required fees are missing or any additional fees are required to facilitate filing the enclosed response, please charge such fees or credit any overpayment to Deposit Account No. 50-1351 (Order No. NAIIP012). A copy of this sheet is enclosed for billing purposes.			
Ø				
Respectfully submitted, Zilka Kotab, PC				

Keyin J. Zilka Registration No. 41,429

P.O. Box 721120 San Jose, CA 95172-1120 Telephone: (408) 971-2573

(Revised 1/96)

# RECEIVED CENTRAL FAX CENTER

JUL. 21. 2006 4:38PM ZILKA-KOTAB, PC

JUL 2 1 2006

NO. 3651 P.

COPY

### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:	)
J. Magdych et al.	) Art Unit: 2136
Application No. 09/895,498	) Examiner: Shiferaw, Eleni A.
Filed: 06/29/2001	) Date: July 21, 2006
For: SYSTEM, METHOD AND COMPUTER PROGRAM PRODUCT FOR DETECTING MODIFICATIONS TO RISK ASSESSMENT SCANNING CAUSED BY AN NTERMEDIATE DEVICE	) ) ) )

CERTIFICATE OF FACSIMILE

D'Suzzioy certify that this correspondence is being facsimile transmitted to the Commissioner for Pretants, Alexandria, VA 22313-1450 at facsimile number: (571) 273-8300 on the above date.

Stand: Upil Skovnand

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

 $\boxtimes$ 

Transmitted herewith is an amendment in the above-identified application.

the required fees for an Extension of Thirne under 37 CFR 1.136 to Deposit Account No. 50-1351.

If the required fees are missing or any antiditional fees are required to facilitate filing the enclosed response, please charge such fees or credit any companies to Deposit Account No. 50-1351 (Order No. NAILPOI2). A copy of this sheet is enclosed for billing progress.

Respectfully submitted, Zilka-Kotab, PC

Keyin J. Zilka

Registration No. 41,429

P.O. Box 721120

San Jose, CA 95172-1120 Telephone: (408) 971-2573

(Revised IAN)

# **CENTRAL FAX CENTER** - 1 -

JUL 2 1 2006

**PATENT** 

# IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

in re application of:	)
J. Magdych et al.	) Art Unit: 2136
Application No. 09/895,498	) ) Examiner: Shiferaw, Eleni A
Filed: 06/29/2001	) ) Date: July 21, 2006
For: SYSTEM, METHOD AND COMPUTER PROGRAM PRODUCT FOR DETECTING MODIFICATIONS TO RISK ASSESSMENT SCANNING CAUSED BY AN INTERMEDIATE DEVICE	) ) ) )

CERTIFICATE OF FACSIMILE

I hereby certify that this correspondence is being facsimile transmitted to the Commissioner for Patents, Alexandria, VA 22313-1450 at facsimile number: (571) 273-8300 on the above

<u>AMENDMENT F</u>

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Examiner:

In response to the Office Action mailed 04/21/2006, please enter the following amendments believed to place the claims in condition for allowance.